# UNITED STATES DISTRICT COURT MIDDLE DISTRICT OF PENNSYLVANIA

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**Plaintiff** 

**CIVIL ACTION NO. 3:16-0402** 

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(JUDGE MANNION)

POCONO MEDICAL CENTER, POCONO HEALTH SYSTEM and WHITESTONE CARE

CENTER, LLC,

Defendants

#### **VERDICT SLIP**

### **Pocono Medical Center**

Do you find by a preponderance of the evidence that the Plaintiff was denied the benefits of, or excluded from participation in, Defendant Pocono Medical Center, Pocono Health System's services, programs, or activities, or was otherwise discriminated against?

Answer: Yes X No

IF YOU ANSWERED "YES" TO QUESTION 1, PROCEED TO QUESTION 2.

IF YOU ANSWERED "NO" TO QUESTION 1, YOUR DELIBERATIONS ARE AT AN END AS TO POCONO MEDICAL CENTER. PROCEED TO QUESTION 5 AND ANSWER THE QUESTIONS BELOW AS TO WHITESTONE CARE CENTER.

#### **COURT EXHIBIT #1**

2. Do you find by a preponderance of the evidence that				e that D	t Defendant Pocono				
	Medical	Center,	Pocono	Health	System	acted	with	delibe	rate
	indifferer	nce to pla	intiff Giter	man's ri	ghts beca	use of h	ner dis	ability?	) · · ·
	Answer:		Yes		No				
QUE	IF YOU STION 4.	ANSWE	ERED "N	О" ТО	QUESTIC	ON 2,	PRO	CEED	то
QUE	IF YOU STION 3.	ANSWE	RED "YE	ES" TO	QUESTI	ON 2,	PRO	CEED	то
3.	State the	total amo	ount of cor	nnoncata	ory domoc	oo if or	av vehi	ob vous	find
J.			ount of cor Giterman	•				·	
	evidence	that will	fairly co	mpensat	e her for	any er	notion	al distr	ess
	injuries you find she actually sustained as a result of Defendant Pocond						ono		
	Medical (	Center, Po	ocono Hea	alth Syste	em's viola	tion of h	ner fed	eral rigi	hts.
	Answer:	\$							

IF YOU FIND THAT PLAINTIFF WAS DEPRIVED OF A FEDERAL RIGHT BUT SUFFERED NO ACTUAL EMOTIONAL DISTRESS INJURIES AS A RESULT OF THAT DEPRIVATION, PROCEED TO QUESTION 4.

4. If you answered "yes" to question 1 and "no" to question 2, then you must award nominal damages of \$1.00. Therefore, if you find that Plaintiff was deprived of a federal right but find Defendant Pocono Medical Center, Pocono Health System's, did not act with deliberate indifference, you must enter \$1.00 as nominal damages below.

Nominal Damages: \$ \_\_\_\_

PROCEED TO SPECIAL VERDICT QUESTIONS PERTAINING TO WHITESTONE CARE CENTER BEGINNING WITH QUESTION 5.

## **Whitestone Care Center**

Do you find by a preponderance of the evidence that the Plaintiff was excluded from participation in, or denied the benefits of, Defendant Whitestone Healthcare Group, LLC (also known as Whitestone Care Center's) services, programs, or activities, or otherwise was discriminated against?

Answer: Yes No

IF YOU ANSWERED "YES" TO QUESTION 5, PROCEED TO QUESTION 6.

IF YOU ANSWERED "NO" TO QUESTION 5, YOUR DELIBERATIONS ARE AT END. SIGN AND DATE THE VERDICT FORM, PLACE THE VERDICT FORM IN THE ENVELOPE PROVIDED AND INFORM THE COURT SECURITY OFFICER THAT YOU HAVE A VERDICT.

6. Do you find by a preponderance of the evidence that Defendant Whitestone Healthcare Group, LLC (a.k.a. Whitestone Care Center) acted with deliberative indifference to plaintiff Giterman's rights because of her disability?

Answer: \_\_\_\_Yes \_\_\_\_ No

IF YOU ANSWERED "NO" TO QUESTION 6, PROCEED TO QUESTION 8.

IF YOU ANSWERED "YES" TO QUESTION 6, PROCEED TO QUESTION 7.

7. State the total amount of compensatory damages, if any which you find Plaintiff has proven by a preponderance of the evidence that will fairly compensate her for any injury you find she actually sustained as a result of the Defendant Whitestone Healthcare Group, LLC's (a.k.a. Whitestone Care Center's) violation of her federal rights.

Answer:	\$	

IF YOU FIND THAT PLAINTIFF WAS DEPRIVED OF A FEDERAL RIGHT BUT SUFFERED NO ACTUAL INJURIES AS A RESULT OF THAT DEPRIVATION, PROCEED TO QUESTION 8.

Case 3:16-cv-00402-MEM Document 154 Filed 04/30/19 Page 6 of 6

8. If you answered "yes" to question 5 and "no" to question 6, then you must award nominal damages of \$1.00. Therefore, if you find that Plaintiff was deprived of a federal right but find Defendant Whitestone Healthcare Group, LLC (a.k.a. Whitestone Care Center) did not act with deliberate indifference, you must enter \$1.00 as nominal damages

Nominal Damages: \$\_\_\_\_\_

below.

YOUR DELIBERATIONS HAVE CONCLUDED.

PLEASE SIGN AND DATE THE VERDICT SLIP, PLACE IT IN THE ENVELOPE PROVIDED AND INFORM THE COURT SECURITY OFFICER THAT YOU HAVE A VERDICT.



Dated: 4/30/2019